

COMMERCIAL CENTERS MANAGEMENT, INC.

P O Box 362983, San Juan Puerto Rico 00936-2983
Phone: (787) 300-6141 Fax: (787) 622-3674
Email: emoitt@ccmpr.com

4/17/2008

Sears Homelife #1915,
PO BOX 660200
Dallas, TX 75266-0200

Re: Santa Rosa Mall
Insurance Certificate Policy
Tenant Name: Sears Homelife #1915,
Tenant #: 600-060
Unit #: 37


Dear Tenant:

Effective January 1, 2008 the above referenced property is owned by Santa Rosa Mall LLC, therefore it is required that your insurance company includes the new owner as an additional certificate holder.

We hereby request that you change your policy to include Santa Rosa Mall LLC, and Commercial Centers Management, Inc. (as Landlord) as an additional insured., then remit to us updated copies of your insurance Policy.

Also, please include tenant number (600-060) and name (Sears Homelife #1915,) on the certificate of insurance.

Cordially,



Edward Moitt
Leasing Department

ACORD™ EVIDENCE OF COMMERCIAL PROPERTY INSURANCE		DATE (MM/DD/YYYY) 08/02/2005	
THIS IS EVIDENCE THAT INSURANCE AS IDENTIFIED BELOW HAS BEEN ISSUED, IS IN FORCE, AND CONVEYS ALL THE RIGHTS AND PRIVILEGES AFFORDED UNDER THE POLICY.			
PRODUCER NAME, CONTACT PERSON AND ADDRESS LOCKTON COMPANIES, LLC-K CHICAGO 525 W. Monroe, Suite 600 CHICAGO IL 60661		COMPANY NAME AND ADDRESS <div style="border: 2px solid black; padding: 5px; display: inline-block;"> RECEIVED AUG 10 2007 Commercial Centers </div> See Attached S-600-000	
PHONE (A/C. No. Ext): (312) 669-6900 FAX (A/C. No. Ext): EMAIL: ADDRESS:		NAIC NO:	
CODE: AGENCY CUSTOMER ID #: SEAH059		SUB CODE:	
NAMED INSURED AND ADDRESS 1002413 Sears Holdings Corporation d/b/a Sears Holdings Management Corporation d/b/a Sears, Roebuck and Co. Attn: Dept. 766X Office B6-334A 3333 Beverly Rd. Hoffman Estates IL 60179		IF MULTIPLE COMPANIES COMPLETE SEPARATE FORM FOR EACH LOAN NUMBER POLICY NUMBER Sec Attachment	
ADDITIONAL NAMED INSURED(S)		EFFECTIVE DATE 06/29/2007 EXPIRATION DATE 06/01/2008 <input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:			

PROPERTY INFORMATION (Use additional sheets if more space is required)

~~C7~~

[illegible]

COVERAGE INFORMATION

CAUSE OF LOSS FORM

BASIC

BROAD

X	SP
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OTHER _____

1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 2680, 26

COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE:	\$ 50,000,000
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DED:

	YES	NO			
BUSINESS INCOME / RENTAL VALUE	X		IF YES, LIMIT: See Remarks	X	Actual Loss Sustained # of months: 12
BLANKET COVERAGE		X	IF YES, indicate amount of Insurance on properties identified above: \$		
TERRORISM COVERAGE		X	Attached signed Disclosure Notice / DEC		
IS COVERAGE PROVIDED FOR "CERTIFIED ACTS" ONLY?		X	IF YES, SUB LIMIT:		DED:
IS COVERAGE A STAND ALONE POLICY?		X	IF YES, LIMIT:		DED:
DOES COVERAGE INCLUDE DOMESTIC TERRORISM?		X	IF YES, SUB LIMIT:		DED:
COVERAGE FOR MOLD		X	IF YES, LIMIT:		DED:
MOLD EXCLUSION (if "YES", specify organization's form used)	X				
REPLACEMENT COST	X				
AGREED AMOUNT		X			
COINSURANCE		X	IF YES, %		
EQUIPMENT BREAKDOWN (if Applicable)	X		IF YES, LIMIT: Included		DED:
LAW AND ORDINANCE - Coverage for loss to undamaged portion of building	X		IF YES, LIMIT: Included		DED:
- Demolition Costs	X		IF YES, LIMIT: Included		DED:
- Incr. Cost of Construction	X		IF YES, LIMIT: Included		DED:
EARTHQUAKE (if Applicable)	X		IF YES, LIMIT: Included		DED:
FLOOD (if Applicable)	X		IF YES, LIMIT: Included		DED:
WIND/HAIL (if Separate Policy)	X		IF YES, LIMIT: Included		DED:
PERMISSION TO WAIVE SUBROGATION PRIOR TO LOSS	X				

REMARKS - Including Special Conditions (Use additional sheets if more space is required)


Limited to Rental Value and Rental Income. Real and/or personal property, including improvements and betterments, boiler machinery, extra expense, Rental Income situated at: Unit 1915, Santa Rosa Mall, Ave. Agas Buenas, Bayamon, PR 00959.

CANCELLATION

THE POLICY IS SUBJECT TO THE PREMIUMS, FORMS, AND RULES IN EFFECT FOR EACH POLICY PERIOD. SHOULD THE POLICY BE TERMINATED, THE COMPANY WILL GIVE THE ADDITIONAL INTEREST IDENTIFIED BELOW 30 DAYS WRITTEN NOTICE, AND WILL SEND NOTIFICATION OF ANY CHANGES TO THE POLICY THAT WOULD AFFECT THAT INTEREST, IN ACCORDANCE WITH THE POLICY PROVISIONS OR AS REQUIRED BY LAW.

ADDITIONAL INTEREST

[M185229]

NAME AND ADDRESS 23411 Real Estate Equity SE c/o Commercial Centers Management, Inc. Plaza Caparra FD Roosevelt Ave., Corner of Park Side Street Guaynabo PR 00968		LENDER SERVICING AGENT NAME AND ADDRESS
MORTGAGEE		AUTHORIZED REPRESENTATIVE 
LOSS PAYEE		

Sears Holding Corporation
Policy Period: June 29, 2007 - June 1, 2008
Property Limit: \$50,000,000

Primary \$50,000,000 All Risk

Allied World Assurance Company
Continental Casualty
Landmark American Insurance Company
Axis Reinsurance Company
Everest Reinsurance Company
Lloyd's of London
Lexington Insurance Company
Ironshore

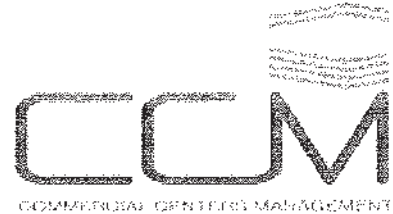
Policy Number

P003839-004
RMP2068254067
LHD353618
RNB733560-07
DP800608A
JA002760V
JA002650W
JA002670W

Coverage/Perils:

Blanket Building and Personal Property
Replacement Cost Valuation
No Coinsurance
Waiver of Subrogation - Included
Mold Coverage - Excluded

All real and personal property owned, acquired by, used by, intended for use by the insured, including real and personal property of others in the insured's care, custody or control; extra expenses, contingent extra expense, rents, rental income, leasehold interests, valuable papers, and records, accounts receivable and other coverages further described in the policy form.



Santa Rosa Mall, LLC

P O Box 362983, San Juan Puerto Rico 00936-2983

Phone: (787) 300-6122 Fax: (787) 622-3661

Email: wrodriguez@ccmpr.com

March 10, 2014

Sears Roebuck and Co. #1915,
Sears C/O FNIS
PO Box 2254
Omaha, NE 68103-2254

Re: Insurance Certificate Policy
Tenant Name: Sears Roebuck and Co. #1915, Santa Rosa Mall, LLC
Tenant: 600-061

Dear Tenant:

Effective 01/01/2014 all Insurance endorsement must include Commercial Centers Management Realty S. n C. as an additional insured. Please remove Commercial Centers Management, Inc (previous additional insured entity).

In accordance with your lease, Tenant must have an Insurance coverage of \$2,000,000 and the Landlord must be included as an additional Insured, as follows,

- a. Santa Rosa Mall, LLC
- b. 3 Pals Caribe, LLC
- c. Commercial Center Management Realty S. n C.

Please make all necessary arrangements with your insurance company, and provide a copy of your insurance coverage in the following 5 days.

Cordially,

Waldemar Rodriguez
Lease Administration

Jose Aguilu

From: Jessy Peral
Sent: Thursday, June 19, 2014 5:07 PM
To: cyndi_beattner@ars.aon.com
Cc: Jose Aguilu; Waldemar Rodríguez
Subject: Insurance - Sears Roebuk #1915 & Sears Homelife #4660

Dear Tenant,

We have sent various notifications requesting an updated Certificate of Insurance. As of today we have not received it from you or we have received a new Certificate of Insurance that does not comply with the lease requirements.

Note that effective 01/01/2014 all Insurance endorsement must include Commercial Centers Management Realty S. en C. as an additional insured. You must remove Commercial Centers Management, Inc. (previous additional insured entity) from your Certificate of Insurance.

In accordance with your lease, Tenant must have an Insurance coverage of \$2,000,000 and the Landlord must be included as an additional Insured, as follows,

- a. 3 Pals Caribe, LLC*
- b. Santa Rosa Mall, LLC*
- c. Commercial Centers Management Realty S. en C.*

It is imperative that you provide the Landlord with an updated a copy of your Certificate of Insurance within the following 5 days. You may send the requested document via email to Mr. Waldemar Rodriguez at wrodriguez@ccmpr.com or via certified mail to

Commercial Centers Management Realty S. en C.
Attn: Mr. Waldemar Rodriguez
P.O. Box 362983
San Juan, PR 00936-2983

Cordially,

Mr. Waldemar Rodriguez
Lease Administrator
787-300-6122

José Aguilú
Lease Administration Supervisor
787-300-6115



Jessy Peral

Accounts Receivable Collector

Commercial Centers Management

Realty S en C

P.O. Box 362983, San Juan PR 00936

Tel (787)300-6141 Fax (787) 277-9601

Email: jperal@ccmpr.com



Go Green! Please don't print this e-mail unless you really need to.

Juan C. Cintron

From: Juan C. Cintron <jccintron@ccmpr.com>
Sent: Thursday, May 12, 2016 4:33 PM
To: Cyndi Beattner
Cc: shldre@searshc.com; afshaw@searshc.com
Subject: RE: Sears Roebuck # 1915 - Certificate of Insurance
Attachments: image001.png

Hi Cyndi,

The certificate Holder and additional insured should be: Santa Rosa Mall, LLC, 3 Pals Caribe, LLC and Commercial Centers Management Realty, SenC.

The address is:

PO Box 362983
San Juan, PR 009336-2983

Thank you.



Juan C. Cintrón Díaz
Lease Administrator
Commercial Centers Management
P: 787.622.9600 x 139
D: 787.300.6139
F: 787.277.9601
E: jccintron@ccmpr.com

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From: Cyndi Beattner [mailto:cyndi.beattner@aon.com]
Sent: Thursday, May 12, 2016 4:05 PM
To: Juan C. Cintron
Cc: shldre@searshc.com; afshaw@searshc.com
Subject: RE: Sears Roebuck # 1915 - Certificate of Insurance

Hi Juan,

Who is the cert holder? What is the cert. holders complete address information?

Thanks

Cyndi Beattner | Administrative Assistant
Aon Risk Solutions
200 East Randolph | Chicago, IL 60601
t +1.312.381.4256 | f +1.312.381.6216
Cyndi.Beattner@aon.com | aon.com
Aon Risk Services Central, Inc. | Illinois Division

From: Juan C. Cintron [mailto:jccintron@ccmpr.com]
Sent: Thursday, May 12, 2016 2:44 PM
To: Cyndi Beattner
Cc: shldre@searshc.com; afshaw@searshc.com
Subject: Sears Roebuck # 1915 - Certificate of Insurance

Good afternoon,

I will like to formally request the current certificate of insurance for Sears Store # 1915 located in Bayamon, PR.

Per our records, we don't have the renewal document which should be effective on August 2015.

If you can please forward it to my email, or if you can give me the name of the right contact person for this matter I will appreciate it.

Thank you for your help in this matter.



Juan C. Cíntroń Díaz
Lease Administrator
Commercial Centers Management
P: 787.622.9600 x 139
D: 787.300.6139
F: 787.277.9601
E: jccintron@ccmpr.com

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